

(3) Each program must provide education for a sufficient number of interns or residents to provide an adequate collegial environment for the educational program and to enhance cost efficiency.

(4) Each program must have an adequate number of qualified faculty with training and experience in family medicine, behavioral sciences, and liaison specialties, for the number of interns or resident in the program. The faculty of the program must engage in periodic educational activities to improve their teaching skills.

(5) Each program must provide an appropriate amount of clinical training for each intern or resident in ambulatory care settings emphasizing family medicine in each year of the training program. This training will be for the purpose of assuring an adequate education in the principles of the practice of family medicine throughout the program. In addition, each training program must provide clinical training in other ambulatory care settings relevant to family medicine, such as emergency units.

(6) Each program must have adequate facilities for the provision of the educational activities and, in particular, have family medicine ambulatory care space sufficient to provide an adequate clinical experience for the interns or residents.

(7) Each intern or resident must serve a sufficient number of families and individual patients with a variety of health care needs to provide the trainee with a broad clinical experience.

(d) *Additional requirements for faculty development programs.* (1) Each project must have a curriculum which:

(i) Directly applies to family medicine training programs;

(ii) Emphasizes improvement of pedagogical skills for clinical and classroom settings; and

(iii) Uses didactic and nondidactic teaching strategies.

(2) Only physicians who teach or intend to teach in family medicine are eligible to participate as trainees in the program.

(3) Each program must have a sufficient number of trainees participating during the conduct of any educational

activities to provide a collegial environment and to make the program cost efficient.

(4) Stipend support from grant funds may be no longer than 24 cumulative months for any trainee.

(5) To be eligible for financial assistance from grant funds, a trainee must:

(i) Intend to teach in family medicine training program on a full-time basis; and

(ii) Be a full-time participant in the training program for at least 3 months.

[45 FR 68895, Oct. 16, 1980, as amended at 49 FR 11613, Mar. 26, 1984; 54 FR 50374, Dec. 6, 1989; 57 FR 45738, Oct. 5, 1992]

**§ 57.1605 How will applications be evaluated?**

(a) As required by section 798(a) of the Act, each application for a grant under this subpart shall be submitted to a peer review group, composed principally of non-Federal experts, for an evaluation of the merits of the proposals made in the application. The Secretary may not approve such an application unless a peer review group has recommended the application for approval. The Secretary will approve projects which best promote the purposes of section 747 of the Act and these regulations. The Secretary will consider, among other factors:

(1) The degree to which the proposed project provides for the project requirements in § 57.1604;

(2) The administrative and management ability of the applicant to carry out the proposed project in a cost-effective manner; and

(3) The potential of the project to continue on a self-sustaining basis.

(b) In determining the funding of projects approved under paragraph (a) of this section, the Secretary will consider any special factors relating to national needs as the Secretary may from time to time announce in the FEDERAL REGISTER.

[45 FR 68895, Oct. 16, 1980, as amended at 49 FR 11613, Mar. 26, 1984; 53 FR 14792, Apr. 26, 1988; 61 FR 6125, Feb. 16, 1996]

**§ 57.1606 How long does grant support last?**

(a) The notice of grant award specifies the length of time the Secretary intends to support the project without